PART B - FEE(S) TRANSMITTAL

Complete and send this form, together www applicable fee(s), to: Mail
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
Or Fax (571)-273-2880

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of natinetaneare fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a separate TEE ADDRESS' for

indicated unless correct maintenance fee notifica	ed below or directed of	herwise in Block 1, by (a) specifying a new corres	pondence address	and/or (b) indicating a so	cparate "FEE ADDRESS" fo	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission.			
21611	7590 03/07	/2008	nave				
SNELL & WILMER LLP (OC) 600 ANTON BOULEVARD SUITE 1400 COSTA MESA, CA 92626				Crafficate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an enveloped addressed to the Mail Stop INSUF FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
COSTA MESA,	CA 92626					(Depositor's name	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/916,872	07/26/2001		Kiyokazu Yamanaka		52478-1800	3423	
		*	TA COMMUNICATION	***			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOTAL FEE(S) DU	UE DATE DUE	
nonprovisional	NO	\$1440 ART UNIT	\$0	\$0 I	\$1440	06/09/2008	
EXAMINER			CLASS-SUBCLASS	l			
KINDRED,	ALFORD W	2181	707-501000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address from PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/147, See 7.03-02 or more recent) attached. Use of a Customer			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2. Tregistered patent, attorneys or agents. If no name is 3.				
Number is required.	2 or more recent) attach	ed. Use of a Customer	listed, no name will be	printed.	no name is 3		
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	ic)			
PLEASE NOTE: Unl recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assignee eletion of this form is NO	data will appear on the pa T a substitute for filing an	atent. If an assign	ee is identified below, the	document has been filed fo	
(A) NAME OF ASSIC Matsushita		strial Co., L	(B) RESIDENCE: (CITY td. Osaka, i		COUNTRY)		
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual 🖎 Co	orporation or other private g	group entity Governmen	
4a. The following fee(s): Issue Fee	To small entity discount p		Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by redicti card. Form PTO-2038 is attached. ☑ The Director is hereby authorized to charge the 150±264 (ign(s), any deficiency, or credit any overpayment, to Deposit Account Number 1920-14 (enclose an extra copy of this form).				
	tus (from status indicate		_				
	s SMALL ENTITY state				LL ENTITY status. See 37	CFR 1.27(g)(2). r the assignee or other party is	
interest as shown by the	records of the United Sta	tes Patent and Trademark	Office.	ie applicant, a regi	stered attorney or agent, or	the assignee of other party in	
Authorized Signature	\longrightarrow	W. Va.		Date	pril 25, 2008		
Typed or printed name	7				April 25, 2008 6. 25,124		
This collection of inform in application. Confident submitting the completed his form and/or suggesti Box 1450, Alexandria, V	ation is required by 37 C tiality is governed by 35 d application form to the ons for reducing this bu- irginia 22313-1450. DC	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR	on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO	etain a benefit by t imated to take 12 r idual case. Any co r, U.S. Patent and THIS ADDRESS	he public which is to file (a ninutes to complete, include mments on the amount of Trademark Office, U.S. De S. SEND TO: Commissione	and by the USPTO to process ling gathering, preparing, and time you require to complete epartment of Commerce, P.O. er for Patents, P.O. Box 1450.	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.